24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
House Majority PAC	
	C C00495028
Check if 24-hour report	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
AMS Communications, Inc.	11 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 500 Sansome St	
Ste 404	Amount
City State Zip Code	3576.66
San Francisco CA 94111-3218	Transaction ID : VN7GDA0DFJ4 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: X House District: 02
Bruce L. Poliquin Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For:
Full Name of Payee Rising Tide Interactive	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1250 H St NW	11 10 2013
Ste 400	Amount
City State Zip Code	500.00
Washington DC 20005-5903	Transaction ID: VN7GDA0DJ16 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising - Estimate Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: X House District: 01
Lee M. Zeldin Oppose	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	4076.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7
(c) TOTAL Independent Expenditures	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
Alixandria Lapp [Electronically Filed] Date	1 18 2015
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	DENT EXPEND	TIONES	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
House Majority PAC			C C00495028
Check if 24-hour report X 48-hour report	rt New rep	port Amends repo	rt filed on
Full Name of Payee Waterfront Strategies			Date of Public Distribution/Dissemination
Mailing Address 3050 K St NW			11 16 2015
Ste 100			Amount
City	State	Zip Code	26861.25
Washington	DC	20007-5108	Transaction ID : VN7GDA0DCV0 Date of Disbursement or Obligation
Purpose of Expenditure Television Advertising		Category/ Type	M M M / D D / Y W Y W Y
Name of Federal Candidate		Support	Office Sought:
Bruce L. Poliquin		X Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		160606.87	Disbursement For:
Full Name of Payee			Date of Public Distribution/Dissemination
Waterfront Strategies			11 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3050 K St NW			Amount
Ste 100			Amount
City	State	Zip Code	33250.00
Washington	DC	20007-5108	Transaction ID : VN7GDA0DF35 Date of Disbursement or Obligation
Purpose of Expenditure Television Advertising		Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate		Support	Office Sought:
Lee M. Zeldin		X Oppose	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		163718.02	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expe	nditures		60111.25
(b) SUBTOTAL of Unitemized Independent Ex	penditures		•
(c) TOTAL Independent Expenditures			>
	andidate or authorize		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Alixandria Lapp	[Electron	nically Filed] Date	11 18 2015
Signature			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼
House Majority PAC	C00495028
	5 000 100020
Check if 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
Waterfront Strategies	Public Distribution/Dissemination
Mailing Address 3050 K St NW	
Ste 100	
City State Zip Code	33250.00
Washington DC 20007-5108 Transact	tion ID: VN7GDA0DSQ5 Disbursement or Obligation
Purpose of Expenditure Television Advertising Category/ Type M Type	
Name of Federal Candidate Support Office Sought:	X House District: 01
Lee M. Zeldin Coppose President	NIV
Calendar Year-To-Date Per Election for Office Sought Disbursement F 2016	
	er (specify) -
Full Name of Payee Date of I	Public Distribution/Dissemination
Mailing Address	
Amount	
City State Zip Code	
Purpose of Expenditure Category/ Date of I	Disbursement or Obligation
Type	
Name of Federal Candidate Support Office Sought:	House District:
Oppose President	Senate State:
Calendar Year-To-Date Disbursement F	For: Primary General
Per Election for Office Sought Othe	er (specify) •
(a) SUBTOTAL of Itemized Independent Expenditures	33250.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7
(a) TOTAL Independent Expenditures	
(c) TOTAL Independent Expenditures	97437.91
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cool with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Alixandria Lapp [Electronically Filed] Date 11	18 2015
Signature	